## **EMPLOYER'S QUARTERLY WAGE ADJUSTMENT REPORT**

Stare Form 52671 (5-06)
INDIANA DEPARTMENT OF WORKFORCE DEVELOPMENT
10 N. Senate Avenue RM SE 106 INDIANAPOLIS IN 46204-2277
Local: 317-232-7436 Toll Free: 1-800-891-6499 FAX 317-233-2706
CONFIDENTIAL RECORD PURSUANT TO IC 22-4-19-6. IC 4-1-6

	FOR OFFICE USE ONLY				
BATCH:		DOC:			

EMPLOYER	TEOORD TO TOO STATE TO	Account N	Account No.	
Social Security Number	Employee	Corrected	Reported Amount	Difference
Number	Employee	Amount	Amount	More or (Less)
			DEDODT TOTAL	
			REPORT TOTAL	